

HOUSE _____ AMENDMENT NO. ____

Offered By

AMEND House Committee Substitute for Senate Substitute for Senate Committee Substitute for Senate Bill No. 577, Pages 73 & 74, Section 208.950, Lines 167 through 172, by deleting all of said lines and inserting in lieu thereof the following:

“(29) "Comprehensive Entry Point", an entity that has staff available to access the web-based/terminal server electronic patient health record, has minimal conflict of interest, has experience in providing federally-funded information and assistance, and utilizes the universal information and assessment system and where a person can seek information and assistance about long-term care services including, but not limited to, hospitals, home care agencies, county developmental disabilities boards, centers for independent living, facilities licensed under chapter 198, RSMo, area agencies on aging, health care providers, transportation providers, home-delivered meal providers, and behavioral health providers;”; and

Further amend said bill, Page 75, Section 208.950, Line 226, by inserting immediately following the first instance of the word “based” the following: “/terminal server”; and

Further amend said bill, Page 77, Section 208.952, Line 41, by inserting immediately following the word “web-based” the following: “/terminal server”; and

Further amend said bill, Pages 85 through 87, Section 208.956, Lines 99 through 185, by deleting all of said lines and inserting in lieu thereof the following:

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1 “4. By October 1, 2008, the Department of Health and Senior Services, in conjunction with the
2 commission convened by the Lieutenant Governor, shall develop and implement a comprehensive
3 entry point system for long-term care through a public process that shall:

4 (1) Offer Missourians an array of choices including community-based, in-home, residential and
5 institutional services;

6 (2) Provide information and assistance about the array of long-term care services to Missourians
7 through a complete state-wide information and assistance system that is accessible by phone, in-
8 person, and via the Internet or other appropriate technology;

9 (3) Allow consumers to independently choose from a full range of home, community-based, and
10 facility-based health and social services as well as access appropriate services to meet individual
11 needs and preferences from the provider of the consumer’s choice;

12 (4) Create a delivery system that is easy to understand and accessible and which shall include
13 financial presumptive eligibility for home and community based services;

14 (5) Create a delivery system that is efficient, reduces duplication, minimizes conflict of interest,
15 and streamlines access to federal, state and local funding sources and programs;

16 (6) Establishes a long-term care system that seeks to achieve timely access to and payment for
17 care, foster quality and excellence in service delivery, and promote innovative and cost-effective
18 strategies;

19 (7) Implements an electronic system utilizing a uniform screening and assessment mechanism
20 establishing consumers’ need for services, availability of informal supports, plan of service,
21 service authorization, and services provided;

22 (8) Provides a nursing home pre-admission screening and resident review (PASRR) mechanism
23 for all Missourians seeking nursing home care that will also track community-based unmet needs;
24 and

25 (9) Provides a care coordination system to be available as needed for consumers at risk of
26 premature institutionalization, those being discharged from a hospital and those individuals in a
27 crisis.

28 5. The duties and functions of the comprehensive entry point shall include but not be limited to:

29 (1) Provide a comprehensive and coordinated service system for Missouri’s long-term care

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- 1 population, prioritizing by greatest need of individuals;
- 2 (2) Evaluate programs and services for the the long-term care population, and determine the
3 extent to which those programs and services meet the needs of the consumer;
- 4 (3) Provide consultation and assistance to communities and groups developing local services;
- 5 (4) Promote community education regarding the services available through publications,
6 presentations, radio, television, and the press;
- 7 (5) Cooperate with agencies of the federal, state and local government in studies and conferences
8 designed to examine the needs of the long-term care consumer and prepare programs to address
9 those needs;
- 10 (6) Establish and maintain information and referral sources throughout Missouri;
- 11 (7) Initiate, evaluate, and provide assistance for improving programs in cooperation with all other
12 state agencies having concerns or responsibility for long-term care;
- 13 (8) Screen, assess, authorize, and track services delivered, and identify unmet needs;
- 14 (9) Provide Missouri's long-term care consumers and their families with a locally focused,
15 coordinated approach to integrating information and referral for all available services;
- 16 (10) Provide for easier access to long-term-care services by providing local access to the long-
17 term-care network;
- 18 (11) Develop referral agreements with local community service organizations, such as senior
19 centers, existing service providers, volunteer associations, and other similar organizations, to
20 better assist clients who do not need or do not wish to enroll in programs funded by the state or
21 the comprehensive entry point;
- 22 (12) Develop a referral agreement that includes protocols designed to ensure that consumers and
23 their families are able to access information and services in the most efficient and least
24 cumbersome manner possible;
- 25 (13) Provide an initial screening of all clients who request long-term-care services to determine
26 whether the person would be most appropriately served through any combination of federally
27 funded programs, state-funded programs, locally funded or community volunteer programs, or
28 private funding for services;
- 29 (14) Determine functional eligibility for the programs and services administered through the
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1 comprehensive entry point for long-term care services for persons residing within the geographic
2 area served by the comprehensive entry point and determine a priority ranking for services which
3 is based upon the potential recipient's frailty level, likelihood of pre-mature institutional
4 placement without such services, and abuse or neglect survivors;

5 (15) Manage the availability of financial resources for the programs and services within MO
6 HealthNet for long-term care participants residing within the geographic area served by the
7 comprehensive entry point;

8 (16) Refer a client to the most appropriate entity to begin receiving services when financial
9 resources become available;

10 (17) Assist the department in locating services for individuals in need of adult protective services
11 and shall give these individuals primary consideration for receiving services;

12 (18) Develop an annual program improvement plan for submission to the department;

13 (19) Develop strong community partnerships to maximize the use of community resources for the
14 purpose of assisting to remain in their community settings for as long as it is safely possible and
15 needs are met; and

16 (20) Conduct comprehensive assessments as appropriate of clients and develop a service plan
17 consistent with established protocols that ensure that the unique needs of each client are met.

18 6. The services to be coordinated through the comprehensive entry point system shall include
19 those funded through MO HealthNet waivers, MO HealthNet state plans, Older Americans Act,
20 and other funding as appropriate.

21 7. The department shall, prior to designation of an comprehensive entry point system , develop by
22 rule operational and quality assurance standards and outcome measures to ensure that clients
23 receiving services through all long-term-care programs administered through a comprehensive
24 entry point are receiving the appropriate care they require and that contractors and subcontractors
25 are adhering to the terms of their contracts and are acting in the best interests of the clients they
26 are serving, consistent with the intent of the Legislature to ensure the most appropriate care in the
27 least restrictive care setting to met the needs of the clients.

28 8. The department shall by rule provide operating procedures for a comprehensive entry point
29 system, which shall include:

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- 1 (1) Minimum standards for financial operation, including audit procedures.
- 2 (2) Procedures for monitoring and sanctioning.
- 3 (3) Minimum standards for technology utilized by the comprehensive entry point system.
- 4 (4) Minimum staff requirements which shall ensure that the comprehensive entry point system
5 employs sufficient quality and quantity of staff to adequately meet the needs of the consumers
6 residing within the area served by the comprehensive entry point system.
- 7 (5) Minimum accessibility standards, including hours of operation.
- 8 (6) Minimum oversight standards for the governing body of the comprehensive entry point to
9 ensure its continuous involvement in, and accountability for, all matters related to the
10 development, implementation, staffing, administration, and operations of the comprehensive entry
11 point.
- 12 (7) Minimum education and experience requirements for executive directors and other executive
13 staff positions of comprehensive entry point system.
- 14 (8) Minimum requirements regarding any executive staff positions that the comprehensive entry
15 point must employ and minimum requirements that a candidate must meet in order to be eligible
16 for appointment to such positions.
- 17 9. This section shall not be construed to allow the comprehensive entry point to restrict, manage,
18 or impede the local fundraising activities of service providers.
- 19 10. (1) The Lieutenant Governor shall convene a commission to advise in the planning,
20 implementation, and evaluation of the comprehensive entry point system. In addition, the
21 commission shall have an on-going responsibility to review and act upon the recommendations
22 contained in the annual program improvement plans.
- 23 (2) The commission shall be comprised of state-wide representatives of long-term care service
24 providers, housing authorities, social service organizations, advocacy groups, representatives of
25 clients receiving services through the comprehensive entry point, and any other persons or groups
26 as determined by the Lt. Governor.
- 27 11. Starting July 1, 2009, the department shall provide to the Governor, Lieutenant Governor and
28 the general assembly a yearly report that provides an update on the implementation the
29 comprehensive entry point system, successes, roadblocks and recommendations including but not
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1 limited to, a transition plan for implementation to the populations currently served by DHSS.

2 12. There is hereby created in the state treasury the “Comprehensive Entry Point System Fund”,
3 which shall consist of all moneys deposited in the fund pursuant to this section, and all moneys
4 which may be appropriated to it by the general assembly from federal or other sources.

5 13. (1) The state treasurer shall be custodian of the fund and may approve disbursements from the
6 fund pursuant to this section. Notwithstanding the provision of section 44.080 RSMo, to the
7 contrary, any moneys remaining in the fund at the end of the biennium shall not revert to the credit
8 of the general revenue fund. The state treasurer shall invest moneys in the fund in the same
9 manner as other funds are invested. Any interest and moneys earned on such investments shall be
10 credited to the fund.

11 (2) All funds collected by or due and payable to the comprehensive entry point system shall
12 remain in and accrue to said fund.”; and

13
14 Further amend said bill, Page 90, Section 208.964, Lines 29 through 30, by deleting the words
15 “natural point of entry” and inserting in lieu thereof the following “comprehensive entry point”;
16 and

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18 Further amend said bill, Page 92, Section 208.968, Line 5, by deleting the words “natural points of
19 entry” and inserting in lieu thereof the following “comprehensive entry points”; and

20 Further amend said bill, Page 92, Section 208.968, Line 11, by deleting the words “natural points
21 of entry” and inserting in lieu thereof the following “comprehensive entry points”; and

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23 Further amend said bill, Page 93, Section 208.968, Line 19, by deleting the words “natural points
24 of entry” and inserting in lieu thereof the following “comprehensive entry points”; and

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26 Further amend said bill by amending the title, enacting clause, and intersectional references
27 accordingly.

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